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THE KEYSTONE

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STATE COUNCIL OF CIVIL DEFENSE, HARRISBURG, PA.

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Hospitals In Disaster

SEVERAL POINTS of particular interest to Hospital leaders were brought out at a joint Civil Defense meeting of the American Medical Association, the American Hospital Association and the Territorial Health Officers, held in Chicago last autumn.

A hospital administrator who happens to have played a vital part in four disasters, Mr. Anthony Eckert, of the Perth Amboy General Hospital, stressed some specific procedures in handling disasters which may be helpful to Pennsylvania hospitals and CD personnel.

In addition to nearly five years of military experience, Mr. Eckert was involved with the explosion of the Hindenberg at Lakehurst; the Morro Castle tragedy which caused many deaths and hundreds of injured; the large explosion at South Amboy; and the Woodbridge train wreck. Based on these experiences, he offers the following comments:

The todays and tomorrows of an uncertain future will be upon us before we know it. If we are not ready to assume our responsibilities squarely, we are courting destruction. When you are hit with several hundred patients pouring into your hospital within an hour and a half, far exceeding your total bed capacity, you have an impact. Most voluntary hospitals are not prepared for such an impact, because they are already occupied at nearly 100% capacity. The only reliable allies in meeting totally unexpected and very heavy demands are:

- 1) A flexible plan of operation.
- 2) Thoroughly well-oriented personnel.

Though expected casualties from one atomic blast are 100 to 1,000 times greater than those our area ex-

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IT IS YOUR BACKYARD AND MINE

(Based on excerpts from and information in Newsweek's publication "Platform," Dec., 1951, issue, "Civilians: Vital Link in Defense." Quoted with permission.)

"TO AN ENEMY STRATEGIST, the United States makes a particularly attractive target, for most of its industrial potential lies in a 'geographical parallelogram,' with Minneapolis, St. Louis, Richmond, and Boston at the corners. Into this concentrated area are crammed 88% of U. S. iron and steel production, 96% of electrical equipment manufacture, 90% of all other machinery-making potential. Of the 50 most populous cities in the country, 31 lie in this area. On the West Coast are other huge concentrations of population, industry, and critical defense installations. Sixty-two million Americans live in critical target areas."

* * *

"If our industries and the men and women who run them have been knocked out, we would be unable to supply our military forces or to lend support to our allies. Then no amount of retaliatory bombing could undo the damage. We would be lost before we had a chance to start."

PREPARATION CAN MAKE A DIFFERENCE

Students of the problem agree that adequate preparation could "make the difference between life and death, between freedom and the long night of the slave state."

* * *

Proper preparation can prevent, or anyway diminish, panic.

"Faced with imaginary dangers, Americans have already proved far from panic-proof. After Orson Welles' War of Worlds broadcast, in 1938, hundreds took to the roads, and one man even killed his children to save them from the terrors of Martian invasion. Last year, after a sewer explosion in Brooklyn, the New York Herald Tribune reported that "in a matter of seconds hundreds of persons were milling about in the streets," some of them shouting "Atom Bomb!" although it is universally agreed that if there were a real atom bomb attack, the most dangerous possible reaction is to mill about on the streets!"

"Panic breeds in the dark and airless soil of ignorance and misinformation. Too few people realize, for

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Quick Wits Win Honor

IF YOU ARE a Ground Observer, spending your allotted hours at an Air Observer's Post, you never know what may happen!

On Saturday, March 8th, Observer Gerald Beaver, of the Marklesburg Post, in Huntingdon County, was watching and listening for planes as usual. A plane came in sight; he reported it; suddenly, as he watched it, he saw one and then another parachutist leave the plane and drop into the mountains below, disappearing quickly from sight. In a matter of seconds, he contacted the Post Supervisor, Mrs. Edna Frank, who immediately called the Filter Center. The drop was actually part of a Civil Air Patrol Exercise, but the OP Post did not know that.

In recognition of their coolness and alertness, Mrs. Frank, Mr. Beaver and the Marklesburg Post have been awarded commendations by the United States Air Force.

PRINCIPLES OF CD OPERATION

(Condensed from State Council of Civil Defense, Circular No. 2, March 11, 1952.)

WE ARE A TARGET

Pennsylvania is a key target for all sorts of enemy attacks. Metropolitan Philadelphia and Pittsburgh are prime points for all-out assault. Many other of our cities are likely marks for specialized attacks aimed at vital industries. Germs and other biological agents can be used to destroy our highly valued livestock and food crops. Saboteurs may try to wreck essential transportation and communications links. Fire may be loosed in our forests. The entire Commonwealth must be organized for Civil Defense.

HOW THE STATE IS DIVIDED

To simplify administrative problems and to provide for maximum operating efficiency under attack conditions, the State Council has divided the Commonwealth into three Areas—Eastern, Central, and Western.

The Eastern Area embraces the Greater Philadelphia target; a number of specialized targets such as Allentown, Bethlehem, Reading, and Lancaster; and the surrounding heavily populated supporting territories. It is a highly compact and closely knit area, with excellent transportation and communications facilities. It is inseparably allied with nearby portions of New Jersey and Delaware, and, because of the industrial and agricultural importance, the whole area is considered a likely mark for attack.

COMMONWEALTH OF PENNSYLVANIA STATE COUNCIL OF CIVIL DEFENSE

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Free subscriptions to this publication may be obtained by writing to the State Council of Civil Defense, Capitol Building, Harrisburg, Penna. Address: Miss Alison Raymond, Editor.

The Central Area embraces no prime targets, but lost or crippled bombers might hit it with weapons originally intended for other places. In addition, there are a number of likely "point" targets, such as Altoona, Bradford, Harrisburg, Scranton, Wilkes-Barre, Williamsport, and York, most of them widely separated. It is a varied mountain, plateau, and valley area devoted to industry, agriculture, and forestry. The chief communications and transportation facilities are confined to the larger river valleys. Although the area is not considered a probable mark for all-out assault, all its cities, boroughs, and townships must be doubly prepared. They must be ready both to look after their own possible needs, and to lend support to other areas. These latter include not only Pennsylvania's Eastern and Western Areas, but also New York and New Jersey cities to their north and east, as well as Baltimore and Washington on the south.

The Western Area includes the prime target of Pittsburgh; a number of important "point" targets such as Beaver Falls, Erie, Johnstown, New Castle, and Warren; and surrounding support territories, both heavily and sparsely populated. The southern two-thirds of the area normally tends to "tie-to" Pittsburgh; the northern one-third to Erie. The former is closely associated with nearby portions of West Virginia and Ohio, and the latter with parts of New York and Ohio.

CONTROL CENTERS

To function effectively, all the Commonwealth's many civil defense organizations must be tied together with a system of control centers governing their actions. Each County office of civil defense and each City, Borough, and Township civil defense organization will have its own Control Center designed to fill its own needs. The smaller centers may consist of little more than a table and a telephone, whereas the big cities will usually have extensive communications equipment, maps, etc.

HOW IT WILL WORK

When an alert sounds, the general public will take immediate cover; they will remain under cover until the All-Clear, unless threatened by fire, or un-

less ordered to move by CD authorities. Fire-fighters, medical teams, rescue crews and others will be ordered into action as needed from designated assembly points. Should a given town be hit, a quick survey would be made, chiefly by wardens, police and reconnaissance crews. Then debris clearance squads, fire-fighters, medical teams, rescue workers and others would be dispatched by the local Civil Defense headquarters, using local resources. A summary damage report, together with requests for whatever outside assistance may be required will be sent to the COUNTY Control Center. In brief, the local Civil Defense Director sizes up the local situation, directs his own forces into action quickly, then tells the County Director what has happened, and what is being done about it; he further asks the County Director to send help from other communities.

On getting local reports, the County CD Director will get in touch with CD Directors of cities, boroughs, or townships in his County which have not been damaged, and direct them to send help to the stricken community. If a great deal of support is sent from any one locality, replacement, or "back up" forces will be called in from other points, so that no area will be left uncovered. If necessary, the County Director will in turn request more outside help, from other counties, by contacting his STATE Control Center, in whichever Area he is.

In other words, he does on a County-wide basis, what the local Director does on a local basis: he sizes up the County situation, directs his County resources into action, through the local Directors; tells State officials what has happened and what is being done about it; and requests further help from outside the County borders through State channels.

* * *

It will be seen from the above excerpt from the State plan, that every borough, township, city and county must be ready to play its own part, or the plan will break down. This means that each locality must have its own people trained and assigned in teams for medical work, rescue, debris clearance, etc., in order that in time of chaos they may function in an orderly manner. 1) Quotas based on population, 2) recruitment on an individual basis, 3) training for the job, 4) individual assignments to a team and/or a location—these are the basic keys to a sound civil defense in every locality.

MAKING EMERGENCY AMBULANCES

IF CIVIL DEFENSE is called into action, the need for ambulances will be greater than any possible number now available; ingenuity and resourcefulness will necessarily have to create enormous numbers of them from available vehicles. Some advance preparation will make this task easier, more satisfactory, and infinitely more comfortable for the casualties.

Plans for such conversions need not be expensive. The CD authorities in Michigan have submitted a plan to Federal authorities for converting the 90,000 standard School Buses in the U. S. into ambulances for either stretcher or "sit-up" cases at the cost of about \$15.00 for a large bus, or \$10.00 for a small one. It would involve fixtures to hold either boards with mattresses, or Army field litters placed across the tops of seat backs.

A large proportion of school buses are within a 100-mile radius of urban industrial centers.

Private companies are also thinking in terms of converting their fleets of small trucks into casualty-carrying vehicles.

International Harvester developed an idea which the American Institute of Laundering has picked up in order to convert laundry delivery trucks into ambulances in as few as 90 seconds. A fleet of twenty laundry trucks has been so equipped at Joliet, Illinois. Each truck has the capacity of six litters. The drivers have all taken the basic first aid course. When the truck-ambulances are needed in an emergency, they will be sent to the city's Public Safety department where each will be equipped with stretchers and sent to the disaster area. Laundry trucks are enclosed, clean, easily equipped with stretchers; the drivers know the city well; the trucks could transport medical supplies, food and water to disaster victims. Other types of fleets, like bakeries, etc., would be equally good.

Fleet owners would not be expected to buy stretchers; their contribution would be the stretcher-holding equipment and the training of their drivers.

(Data from the CD Digest, published weekly by the Detroit Public Library, Detroit.)

when the dust clears. If we give up, run away, or lose by default, this free land of ours will become yet another slave country. So far, nearly all of us have "left it to George" to worry about that.

We cannot wholly blame Congress for CD's meagre fare. The voters have not felt strongly on the issue either. Only a scattering of letters from constituents reached Congressmen regarding appropriations for Civil Defense. Many heard nothing whatsoever; the Congressional vote for cuts was greeted by an echoing silence.

Don't let's blame somebody else for the fact that Civil Defense in this country is lagging. It is lagging; but it is your fault and mine that this is true, not some vague "somebody else." Next time you hear yourself "sound off" about how poor Civil Defense is, or how "apathetic" the people are, stop and think, "What have I done about it myself?"

It is your responsibility and mine, not the Federal Government's, nor the State's, nor even the County officials. If we the people ourselves do not care enough to let our own Commissioners, Burgesses, and State representatives know that we are concerned about being prepared in our own communities, what right have we to blame anybody else?

BIOLOGICAL WARFARE IN THE PRESS

AMERICAN MILITARY STRATEGISTS apparently rate germ warfare second only to the A-bomb as a potential killer. Some seem none too sure it belongs behind the A-bomb. No one in a position to know will say how far along the U. S. is in its research. There has been a strict information blackout on germ warfare since 1947. But the dribbles of information made public add up to awesome possibilities.

Wash. Post-CP, 3/24/52

* * *

Professor Gaston Ramon, honorary Director of the Pasteur Institute said in Paris last month that the world's livestock herds are gravely threatened by the present spread of foot-and-mouth disease. "The scourge is afflicting Europe, South America, and Canada and threatens to invade the U. S. Certain regions of North Africa and Asia are equally involved."

Wash. Star, 3/5/52

* * *

State Agriculture Dept. says anthrax is on the increase in Illinois since last July. Officials, following a meeting with Federal and State livestock experts, said measures taken thus far to stop the animal disease have shown little effect. Said they have not yet been approached by FBI in its announced investigation of the possibility of sabotage.

Chicago Trib., 3/29/52

Have you thought of this?

Is your plant so noisy you don't hear the sirens? Have you thought of equipping an elevator with a double horn, and sending it from top to bottom of your building two or three times? This was done in a Water Works Building; on a surprise alert 1,100 persons reached their shelters in three minutes.

* * *

One community is working steadily on a program to immunize all its citizens against tetanus, typhoid, and diphtheria. They reason that if water, sewer, and electric power systems were disrupted, such a program would help to prevent the occurrence of widespread disease.

* * *

We need your ideas, too. What can you send us?

It Is Your Backyard and Mine

(Continued from page 1)

example, that only the explosive radioactivity of a high air burst, which lasts for a little more than a minute, is likely to be dangerous . . . Yet ignorance of this fact could easily cause a panicked stampede from a city where no actual danger existed . . . This kind of thing need not happen."

PREPARATION COULD EVEN DETER ATTACK

Assistant Secretary of Defense, Daniel K. Edwards, considers Civil Defense a "sword as well as a shield." "Preparation," he says, "could rob every bomb dropped on an American city of at least a part of its destructive power."

THE CITIZEN'S RESPONSIBILITY

"Even the most comprehensive and detailed defense plans will collapse unless everyone knows what he is supposed to do and has the sense to do it promptly and intelligently," the New York Herald Tribune commented editorially.

* * *

From the above material we can draw certain clear conclusions. In the end, if attack comes, every person must be responsible for saving his own life so that he can render help, not need it,

How the Nurses Started in Bethlehem

By MISS NAOMI HOUSER, R. N.

PRESIDENT, PENNA. STATE NURSES ASS'N

AN IMMEDIATE CLARIFICATION of our assignment was achieved at the very first meeting of the Medical Division of the Civil Defense Organization for the Bethlehem area by means of a personnel and functional organization chart. Here we found the section on nursing responsible for:

Nurses and Nurses Aides

- a. Training personnel
- b. Assignments:
 - 1) Clearing stations
 - 2) Emergency hospitals
 - 3) Mobile Medical Units

Civil Defense requested a list of nurses.

Located on the boundary line of two counties, we reviewed the list of registered nurses for both Northampton and Lehigh Counties. Checking the nurses who lived in our geographic area (including outlying sections), we also contacted the Red Cross for a list of Nurse Aides and the women who had taken the course in Home Nursing.

At the next meeting of the Medical Division I reported our plan to get in touch with these nurses in order to secure pertinent information. Explaining that there would be a minimum ex-

pense of \$50 to include postage, cards, etc., I requested financial assistance.

The immediate reply was "No money"! The Chairman, however, suggested that we go ahead with the survey, assuring us that the city fathers would finance the undertaking.

We then sent out 531 letters to the nurses, asking their cooperation and enclosing a stamped envelope for the return reply. Of these, 56 were returned as unknown, and 291 were returned, giving us our basis of factual information.

As soon as the list was compiled, copies were supplied to deputies in charge of Casualty Stations, Control Centers, Emergency Hospitals.

We next turned our attention to the problem of training for "Nursing in an Atomic Raid." All our courses have been splendidly supported by the local press.

In summarizing, the main problems to be faced are: financing correspondence and other expenses, securing press cooperation, keeping the file up-to-date, and making arrangements for the lectures—meeting places, repeat courses, etc.

The job is not difficult, but we must all keep at it until every nurse in the Commonwealth is well prepared.

MEDICAL PUBLICATIONS

MEDICAL FILMS

The Medical Film Institute of the Association of American Medical Colleges has published a review of fourteen films on atomic medicine. The review is available for 50¢ from Health Publications Institute, 216 N. Dawson St., Raleigh, North Carolina.

Each review consists of a detailed content description, an appraisal, and notes on use. The films are listed as being "suitable," or "of limited usefulness," for CD training in atomic medicine.

"Suggestions for Film Use" discusses the general application of the films and correlates them with the following audiences:

- a) Physicists and specialists in atomic medicine;
- b) Medical supervisory personnel;
- c) Hospital teams, field medical service units, dentists, medical and dental students, osteopaths;
- d) Non-medical CD administrators;
- e) Public Health and radiological health personnel;
- f) Nurses and lab technicians
- g) Practical nurses, embalmers, and ex-medical corpsmen;
- h) First-aid personnel, such as litter bearers;
- i) Rescue workers, fire-fighters, and lay persons with First Aid training.

Information on obtaining the films is given. Military films are subject to specific regulations. Some films are available only to medical professional personnel.

* * *

PLASMA SUBSTITUTES

A bibliography entitled "Plasma Substitutes; Except those Derived from Human Blood" has been compiled by Mr. Karl A. Baer, and is in the Army Medical Library, Washington, D. C. It covers the years 1940-1951, and runs to 141 pages.

The bibliography is annotated, arranged by subject, of materials on all types of plasma substitutes not derived from human blood. There is an author index.

Don't forget

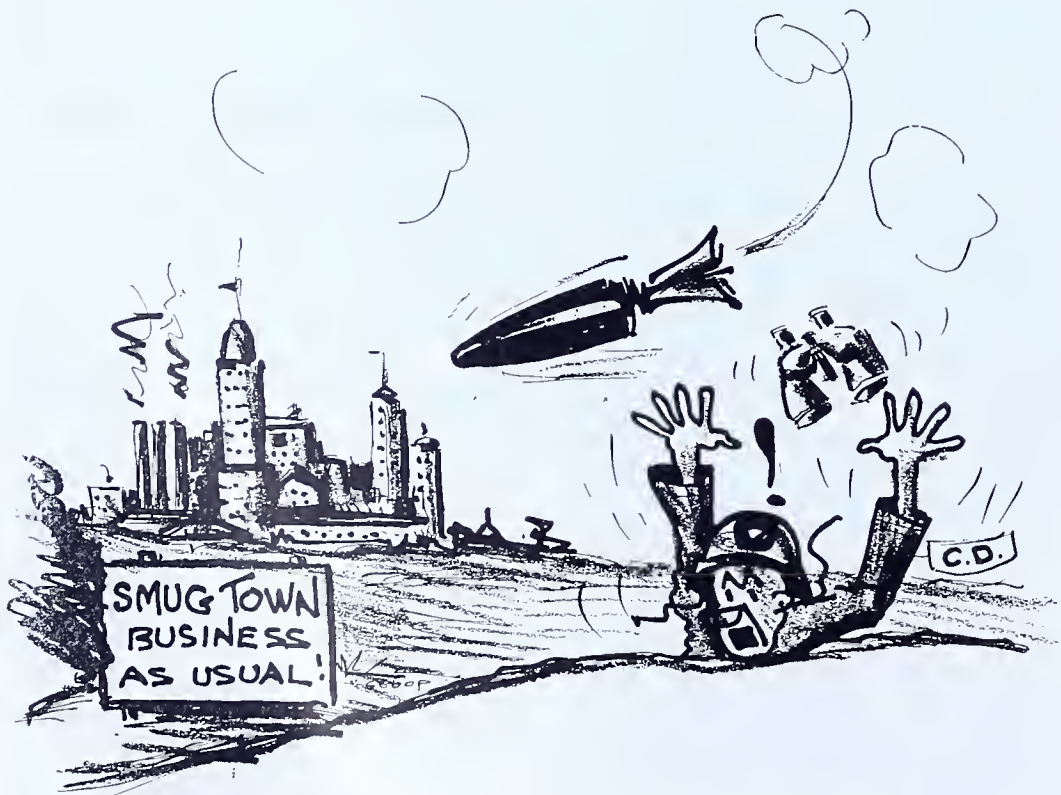
THE ALERT AMERICA CONVOY

It will be in

Philadelphia JUNE 6TH-13TH
at the Commercial Museum

Pittsburgh JUNE 18TH-24TH
at the Hunt Armory

Dioramas, movies, action exhibits
No CD volunteer should miss it.
Free admission.



"I told 'em! I told 'em! I told 'em! Now Look!"

Cartoon by Scoop Coates, News Tribune, New Brighton, Pa.

HOSPITALS IN DISASTER

(Continued from page 1)

perienced in the Woodbridge wreck (85 killed and over 700 injured), I am still positive that the most severe handicaps and the greatest odds in the aftermath of a bombing can be overcome by careful and detailed advance planning. It is a chain responsibility; the integration of all groups is absolutely imperative. Your disaster plans **MUST WORK**, and not just exist on paper.

Every hospital administrator must be a member of his local or area Civil Defense Council. We must know the functions of other groups in CD; how authority is placed; what each group can procure; the channels for making requests. We cannot get this information from sitting on the sidelines, or from merely reading bulletins.

Unless you are thoroughly organized within your own local unit, here is what happens:

Every available ambulance within 50 miles rushed to the train wreck site. Curiosity seekers congregated at the scene and clogged the highways leading to it. The result was great confusion, with ambulance crews and rescue teams being greatly hampered in their work by the milling mobs and the excessive equipment on hand. Doctors from miles around came to the hospital and at one time we had more doctors present than patients. We had to ask many of them, in as polite a way as possible, to leave the building. Unless you have an organized system, that is going to happen every time.

In our planning, we have selected chiefs and deputies for teams in major surgery, EENT, G-U, orthopedics, anesthesia, minor surgery, sorting, shock, burns, and X-ray. These teams are divided into groups. These men do *nothing* but the work to which they are assigned.

In addition, we have other doctors assigned to take care of the regular patients in the hospital. Doctors have been assigned, too, as chiefs of the seven emergency hospitals planned in our immediate area. Teams identical to those outlined above have been delegated for service in the area hospitals.

A Public Relations Director is a very important person in a disaster. Thousands of people seek information about loved ones who may have been involved in the disaster. They want to know if their loved one is in a hospital—if so, what his condition is. Information must be given to the press

and radio for dissemination to the public. To conduct both these important functions properly, systems must be set up in advance.

We have disaster meetings in our hospital once each month, and go through dry runs. Every single department head attends, as well as the doctors and invited local CD Council members.

Setting up a program in our own hospital is our responsibility; we *have* to do it; we cannot pass it on to anyone else. We must see that the plans are thoroughly well known, and function smoothly. It takes a lot of time; it takes effort; it takes money. We have a special disaster unit, in our particular hospital, in which roll-away beds, equipment for setting up emergency nursing units, instruments, drugs and sterile supplies are stored specifically for disaster use. To date we have spent over \$5,000.00 but it is an investment well worth the expenditure.

Major problems such as screening, patient flow, maintaining medical records, and the use of existing facilities must be faced and planned for by every hospital. A little thing like a medical record can become tremendously important from the point of view of civil acts and law suits which may require accurate information after the confusion clears.

I believe the most important room in a hospital at a time of disaster is the telephone section. We have centralized all our vital information in this area. We have a direct line to the Fire Department; another with the Police. We keep our keys in this room, in a case with a glass front panel; in case we cannot find the authority with the keys, the glass front can be broken and the needed key obtained. In addition, we have a large permanent sign behind glass, listing all the vital personnel. The medical staff is listed according to the teams. Our switchboard operator follows this list in making calls. Only a few calls have to be made. The local Physicians Exchange cooperates and calls other doctors.

I believe all hospitals must be able to operate and start emergency units immediately. At the Perth Amboy General Hospital, we have a 50-bed emergency unit, composed of roll-away beds. They fold up and are on wheels, each complete with its linen, right down to a washcloth. This 50-bed unit can be set up in 18 minutes. We have dry runs every two or three months. It works.

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For CD Medical Personnel

BOTH ALLEGHENY COUNTY and Lehigh County have taken advantage of an offer made by Special Science Feature Service, 2 West 45th St., New York City; they have secured from them, without cost, thousands of copies of a pamphlet entitled "Treatment of Atomic Bomb Injuries. The Emergency Treatment of Wounds, Shock, Burns and Fractures."

This material, prepared by Dr. Martin J. Healy, M. D., is excellent for all medical personnel including First Aiders, Ambulance Unit personnel, Nurses' Aides, and Emergency Hospital personnel. It is also valuable for Wardens and Police, as it concerns itself with emergency on-the-spot treatment of casualties.

The information is presented briefly, specifically and practically, in four short pages, giving concise details that would prove extremely helpful in case of emergency.

The Special Science Feature Service states that they will imprint the official title (i. e., County or City CD organization) and the local insignia; they will supply orders of not less than 3,000 copies to CD organizations, free of charge.

Film Made For Industries and Plants

A TWENTY-ONE MINUTE film has been made for McGraw-Hill Text-Films, 330 West 42nd Street, New York, entitled "Disaster Control." It is available from some State Film Libraries in the Commonwealth, but is NOT available from the State Civil Defense office in Harrisburg. Please write McGraw-Hill for sources.

The film is directed towards management. Although concerned basically with atomic bomb damage to plants, the film makes suggestions applicable to any disaster.

The first half of the film is concerned with the personnel set-up. Plants must depend on their own men and materials, not outside help, in order to keep rolling. Workers must be trained and equipped, and given responsibility if morale is to be good and panic prevented.

The second half of the film deals with the physical set-up and covers communications, alarms, preparation to reduce damage, the shoring up of walls, screening of windows, protection of precision or vital machinery, and shelters.

MEDICAL PLANS ROLLING WELL

THE CIVIL DEFENSE medical organization of Montgomery County (pop. 351,964) has progressed to a noteworthy degree, as a result of sound planning and steady, ceaseless, detailed work, under the leadership of Dr. George A. Wagoner, M. D.

There are 62 political subdivisions in Montgomery County; it was obviously inefficient and impractical to work on this basis. The Medical Division therefore divided the County into four Districts, each one determined by the existing hospital facilities as prorated by the population.

"You cannot work this thing out," stated Dr. Wagoner, "unless you determine what may be required of you, figure it out on a prorated basis, distribute the load in accordance with your facilities, and *set definite quotas*. That gives everybody something concrete to work towards, and the thing comes to life. You cannot do it in vague generalities."

Montgomery based its estimate on the hypothetical problem presented to Philadelphia, by the FCDA. Other communities can figure their own possible load by using the FCDA Manual, AG-11-1, and estimating their own population, nearby targets, etc. "You have got to sit down with a pencil and do a little arithmetic," says Dr. Wagoner.

In the Philadelphia problem it was assumed that Montgomery County sustained 3000 casualties of its own. The County announced that it could care for its own casualties without outside assistance (except for medical supplies) and in addition could receive and care for 22,000 medical casualties from Philadelphia.

Inasmuch as there normally exist 1,644 general hospital beds within the County, this necessitated the creation of 25,000 additional beds. These were prorated to the four Districts of the County according to their potential, on a 5000, 9000, 7500, 3500 basis. To accomplish the task, existing hospitals must, of course, increase their capacity, and auxiliary hospitals must be planned in detail. Using District I, in which there is one hospital of 333 beds, as an example, this is how additional beds are to be obtained:

Existing. The 333-bed hospital will provide 1000 beds. All movable patients will be evacuated across the street to a Grammar School Building, with the exception of the Maternity cases; regular admissions will continue in the Maternity Building. Proceeding with the evacuation, the hospital will be prepared to receive casualties according to a prearranged

plan, using solarium, corridors, etc., to increase their capacity to 1000.

Surgical. Bryn Mawr College will be used as an Auxiliary Surgical Hospital, and will provide 2500 beds. Students then in residence will be transferred to another local school and college in the neighborhood, where they will stay until they can be evacuated to their homes, unless they are employed by Civil Defense. Many have already been trained in Nurses' Aide, and will be used as such.

Hospitals: Here's an Offer of Help

Here's an offer of help extended to all hospitals within the Commonwealth:

The Committee on Nursing Resources of the Penna. State Nurses' Association, would like to have the name of any hospital where courses in nursing in Atomic Warfare have not as yet been held. They will gladly give their help and resources in planning such courses.

Please write to MISS DOLORES FORMAN, R. N., *Ass't Executive Secretary*, 2515 North Front Street, Harrisburg, Penna., for further information.

Medical. Haverford College will be used as an Auxiliary Medical Hospital and will provide 1500 beds. Students then in residence will be housed in college buildings such as barns, not suitable for hospital use, and will be assigned CD duties, chiefly medical, such as Litter Bearers.

Complete professional and administrative staffs have been appointed for the above four hospitals (including the Grammar School). They are listed and cross-indexed in card-file form; the list is under constant revision. Each person has been advised of his assignment and duties, and would report automatically to his post tonight, if the need arose. So far, personal letters of appointment have been sent to 1150 physicians, dentists, nurses, os-

teopaths, chiropractors, and others in the healing professions, in Montgomery County; 80 persons have been specifically appointed to non-professional administrative posts. Continued appointments are being processed as rapidly as possible. Mimeographed lists of the staffs assigned to each hospital are already distributed to all key personnel in addition to the Master card file.

A blood-collecting bank will be housed in the Shipley School, away from the existing hospital, in order to reduce the inevitable congestion in and about the hospital area. A fleet of 55 refrigerated trucks has been offered to the County by a private Corporation; two will be used for the transportation of blood from the collecting unit to the hospital. The Committee on Blood and Blood Derivatives does NOT plan to initiate mass blood grouping or typing in advance. They believe that would be wasted effort, and that the recipient can be typed at the time of administration.

Other communities have institutions of various sorts available in which Auxiliary Hospitals can be established. Many have talked about them; some have designated them on paper; a few Counties have gone further than that. Montgomery County has gone ahead to the point that it could operate—perhaps not perfectly, but it could operate—NOW. It has not only made its inventories of locations and personnel, but has actually assigned workers to their posts; it has set up its own Nurses' Aide Training Course to supplement the Red Cross, in the hope of training a total of 21,000 Nurses' Aides in the County; it has established Traffic Zones around every hospital in the County, in consultation with the Police authorities; it has set up communications by telephone, radio, and courier, *with personnel assigned*, who would report automatically NOW in case of disaster.

Each of the four Medical Districts has a Director and complete medical organization; these are joined and interlocked at the County level. An Advisory Scientific Committee has been appointed.

Mobile First Aid Units

It is planned to organize eight Mobile First Aid Units, two from each District, prepared to operate at any point to which they are dispatched, to screen casualties, provide First Aid treatment, and transport seriously in-

jured persons to a hospital. The staffing of these eight units is under way and in several areas nearly complete. The Volunteer Medical Service Corps, Veterans' groups, local Fire Company "Second Alarmers," college men, etc., are being organized into these units, each of which requires a total personnel of 200. Two of the above mentioned refrigerated trucks will be assigned to each of the eight units, and will accompany each unit for the transportation of biologicals and blood.

Space does not permit details regarding Public Health precautions, funeral and morgue plans, and the full story of Dr. Wagoner's thorough Medical Division.

Everywhere the medical problem deserves the highest priority. Montgomery County shows that it is possible to set up a workable disaster plan, and to recruit the needed personnel if you:

- a) Determine quotas and goals;
- b) Establish training programs;
- c) Assign personnel specifically, by personal letter of appointment;
- d) Keep records fully and up-to-date.

There is no short cut; it takes endless work; but it can be done.

HOSPITALS IN DISASTER

(Continued from page 5)

The Police Dep't has assigned a detail of 10 men to the hospital. These Police officers report to the hospital automatically when a disaster occurs. They are under a sergeant who posts them according to instructions the hospital has given him.

The Red Cross has activated a Nurses' Aide program and conducted many courses in First Aid. The local Fire Dep't First Aid Squad has set up its headquarters as a 48-bed emergency hospital. A school two blocks from the hospital becomes an information center. The County has installed two-way radios in five hospitals. Local and County Civil Defense groups have cooperated beautifully.

I know that all medical people will agree that one of the greatest problems facing America today is Civil Defense—which is, of course, disaster defense on a tremendous scale. Complacency is sheer nonsense. In the last 35 years we have been lucky, going through two World Wars without having enemy action hit our shores; but the boundaries are shrinking, the targets are differently aligned; we could be hit at any time.



(Perkasie News-Herald photo)

Bucks County Cars Are Parked, People Safely Hidden.

TWO COUNTIES HOLD ALERTS

TWO EASTERN AREA COUNTIES, Bucks and Chester, held countywide Alerts during the last week of March. Chester County put on an elaborate show lasting for two hours; Bucks had a five minute test to determine public reaction, traffic procedures, etc. In Chester County, the CAP group dropped thousands of leaflets reading "This might have been a Bomb."

The Control Center was manned; amateur radio operators were dispatched to various localities throughout the County to report on conditions.

"Refugees" were registered, processed, and "cared for" in Mass Care Centers; about 2000 faculty and students of State Teachers College staged incidents such as fires and evacuated two dormitories (600 persons) in four minutes.

A great air of excitement and activity surrounded many school buildings and Legion Posts throughout the County as "refugees" arrived by truck, auto, and on foot, to be handled by welfare workers, doctors, and their aides.

Col. Horace Shelmire, County Executive Director, summarized the Alert as follows:

"The results of the afternoon were encouraging even though it was demonstrated that there was great need for more people trained in First Aid, Welfare, Police, Fire, Rescue, and Damage Control. The *willingness to do* is definitely not enough. Intensive training is needed, and the difficulty in convincing people that they should devote

the time to such training is a serious obstacle to anything near perfection."

The test in Bucks County was differently planned and executed. The Red Alert sounded through the County at 11 A. M. and for five minutes all traffic was halted, factories stopped their work, courts halted their proceedings and everyone took shelter; Police and Auxiliary Police closed every highway leading into and out of the County.

Colonel A. M. Heritage, Director of Bucks County CD Council, used the exercise to test his communications and warning systems, to educate his citizens, and to ascertain to what degree the County was informed as to their own self-protection procedures. He followed the exercise with questionnaires sent to the CD Directors of each Township or Borough in his County, in which he asked the following questions:

Was the public well informed as to the time and date of the exercise?

Is your political subdivision equipped with sufficient whistles or sirens to alert the people?

Did traffic stop as requested?

Were pedestrians cooperative?

Did people in general seem to know what the sirens were blowing for, or did they ask?

"With few exceptions," says Colonel Heritage, "the answers to the question 'were pedestrians cooperative?' was 'yes.' I assume, therefore, that Mr. and Mrs. John Q. Public and their daughter Alice know, at least in a general way, what to do to protect themselves should they ever be in an area of enemy disaster."

Nevada Tests Autos Under A-Bomb

AFTER TESTS made by the Atomic Energy Commission on five cars, during atomic tests in Nevada, the word is "Cars provide only limited protection from an atomic burst."

The vehicles, sedans with steel turret tops and safety glass windows, were placed at various distances from an atomic explosion such as any that might occur in an enemy attack.

The Federal Civil Defense authorities advise:

1) If there is warning, and you are downtown, where it is congested, park your car quickly by the side of the street, and hurry to the nearest designated Shelter. If you do not see one readily, take to the nearest tall building.

2) If you hear sirens but are some distance from any kind of shelter, or out in a residential or country area, roll down the windows quickly to minimize the danger from flying glass, and crouch down as low as you can get.

3) If the first thing you know is the Bomb Flash, stop your car, crouch low, and stay there until the debris has stopped falling. Then drive your car to the side of the road (if you can), and get out of the way, so as not to interfere with Civil Defense traffic.

The summary of the findings in Nevada were:

Cars with metal tops will give protection from flying or falling objects but not from radiation; they will not provide "safe" shelter, but an automobile is far better than no shelter at all *provided the rules about lowering windows and crouching down low are observed.*

COUNTY DIRECTORS

Some County Directors have still not sent their Mailing Lists for the KEYSTONE DEFENDER.

Beginning with the July issue, copies will no longer be sent in bulk to those who have not responded.

Send your list to: KEYSTONE DEFENDER, Room 1335 Suburban Station, Phila. 3, Pa., if you wish to retain your quota of copies each month.

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Venango County Views the Problem

By HAROLD CLARK, C. D. Director

IT IS A COMMON BELIEF that because our nation has approved a \$50 billion dollar military budget we are in some way purchasing security. *Security is not for sale.* Regardless of the damage we can do to the enemy, if we are hit here at home our ability to survive may well depend on the preparation which we are trying to do right now, through Civil Defense.

The first step is to get the public to know: why it is important to get our plans on paper NOW; what an atomic bomb can do, and also what it cannot do; what protective measures we can take to lessen the damage; and, most critical of all, what we must do to keep our industries going.

For the average citizen there are three comparatively simple things he needs to do at present—not more:

- a) Be familiar with the facts;
- b) Take training so that he can fill some needed job effectively, if the emergency occurs.
(Note: Courses now available in nearly all areas include the Red Cross courses of First Aid, Nurses Aide, and Home Nursing; training in Fire Fighting; Auxiliary Police instruction; and Rescue Team work.)
- c) Get a specific assignment of duty, so that he can report automatically in emergency to a given place and job.

Meanwhile the CD planners in every town, city, and county, must be working out detailed surveys of all physical resources and manpower resources, so they know what they have to work with in time of disaster, and how they can mobilize it quickly.

We must get our plans down in the form of blueprints and diagrams, to the point where we have specific individuals who would report automatically to a designated point and start action—at least those in the key posts.

We, in Venango County, feel Civil Defense must be taught in the schools; we believe we must steadily keep CD before the public in the form of pamphlets, radio programs, TV, moving pictures, and Exercises. Civil Defense is going to be here a long time. We cannot afford to wax enthusiastic and then have our interest lag. In our County we are moving steadily along; we are eager to cooperate with neighboring counties. We are preparing our community to act as a reception center for refugees and injured persons, though at the same time keeping in mind that we ourselves may be directly involved through sabotage, fire, or bombing.

Our plans are flexible; we keep trying to get them down in black and white, in better and better form, with more and more key positions staffed to form a working "core" if the need should suddenly strike.